**United Services Inc.**
Dayville, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2022 - September 2022   (Data as of Dec 16, 2022)

## Provider Activity

| Monthly Trend | Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|---|
| | Unique Clients | 2,198 | 2,199 | 0% |
| | Admits | 433 | 439 | -1% |
| | Discharges | 458 | 423 | 8% |
| | Service Hours | 7,910 | 8,789 | -10% |
| | Bed Days | 4,084 | 5,933 | -31% ▼ |
| | S.Rehab/PHP/IOP | 837 | 758 | 10% |

▲ > 10% Over 1 Yr Ago    ▼ > 10% Under 1Yr Ago

## Consumer Satisfaction Survey   (Based on 209 FY22 Surveys)

| | Question Domain | Satisfied % vs Goal% | Satisfied % | Goal % | State Avg |
|---|---|---|---|---|---|
| ✓ | Participation in Treatment | | 94% | 80% | 92% |
| ✓ | Respect | | 90% | 80% | 91% |
| ✓ | Quality and Appropriateness | | 90% | 80% | 93% |
| ✓ | Overall | | 90% | 80% | 91% |
| ✓ | General Satisfaction | | 90% | 80% | 92% |
| ✓ | Access | | 89% | 80% | 88% |
| ● | Outcome | | 78% | 80% | 83% |
| ● | Recovery | | 65% | 80% | 79% |

Legend: ▬ Satisfied %    | Goal %    ▬ 0-80%    ▢ 80-100%    ✓ Goal Met    ● Under Goal

## Clients by Level of Care

| Program Type | Level of Care Type | # | % |
|---|---|---|---|
| **Mental Health** | | | |
| | Outpatient | 1,754 | 64.9% |
| | Community Support | 255 | 9.4% |
| | Social Rehabilitation | 116 | 4.3% |
| | Case Management | 95 | 3.5% |
| | Employment Services | 78 | 2.9% |
| | Crisis Services | 74 | 2.7% |
| | Consultation | 40 | 1.5% |
| | Residential Services | 18 | 0.7% |
| | ACT | 12 | 0.4% |
| **Addiction** | | | |
| | Case Management | 82 | 3.0% |
| | Outpatient | 69 | 2.6% |
| | Medication Assisted Treatment | 32 | 1.2% |
| | Employment Services | 14 | 0.5% |
| **Forensic MH** | | | |
| | Forensics Community-based | 64 | 2.4% |

## Client Demographics

### Age

| | # | % | State Avg |
|---|---|---|---|
| 18-25 | 306 | 14% | 10% |
| 26-34 | 365 | 17% | 21% |
| 35-44 | 399 | 18% | 23% |
| 45-54 | 387 | 18% | 19% |
| 55-64 | 439 | 20% | 20% |
| 65+ | 279 | 13% | 8% |

### Gender

| | # | % | | State Avg |
|---|---|---|---|---|
| Female | 1,338 | 61% | ▲ | 42% |
| Male | 856 | 39% | ▼ | 58% |
| Transgender | | | | 0% |

### Race

| | # | % | | State Avg |
|---|---|---|---|---|
| White/Caucasian | 1,727 | 79% | ▲ | 62% |
| Other | 337 | 15% | | 12% |
| Black/African American | 61 | 3% | ▼ | 17% |
| Unknown | 24 | 1% | | 6% |
| Asian | 17 | 1% | | 1% |
| Multiple Races | 16 | 1% | | 1% |
| Am. Indian/Native Alaskan | 12 | 1% | | 1% |
| Hawaiian/Other Pacific Islander | 4 | 0% | | 0% |

### Ethnicity

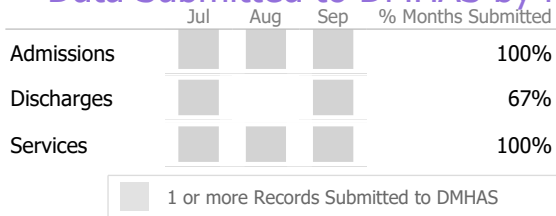| | # | % | | State Avg |
|---|---|---|---|---|
| Non-Hispanic | 1,796 | 82% | ▲ | 69% |
| Hisp-Puerto Rican | 252 | 11% | | 11% |
| Hispanic-Other | 78 | 4% | | 8% |
| Unknown | 54 | 2% | | 12% |
| Hispanic-Mexican | 15 | 1% | | 1% |
| Hispanic-Cuban | 3 | 0% | | 0% |

Legend: ▬ Unique Clients    | State Avg    ▲ > 10% Over State Avg    ▼ > 10% Under State Avg

Variances in data may be indicative of operational adjustments related to the pandemic.

**ABI Consultation Services**

United Services Inc.

Mental Health - Consultation - Consultation

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 40 | 19 | 111% | ▲ |
| Admits | 8 | - | | |
| Discharges | 6 | - | | |
| Service Hours | 6 | - | | |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | 100% |
| Discharges | ▢ | | ▢ | 67% |
| Services | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over      ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on  Active Consultation Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**Addiction Recovery-Dac 545201**
United Services Inc.
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 32 | 26 | 23% | ▲ |
| Admits | 8 | 4 | 100% | ▲ |
| Discharges | 7 | 4 | 75% | ▲ |
| Service Hours | 89 | 68 | 31% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 99% | 89% |
| ✓ | Valid TEDS Data | 100% | 81% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 100% | 14% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| | Valid Axis I Diagnosis | 97% | 99% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 3 | 43% | 50% | 42% | -7% | |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Not Arrested | | 31 | 97% | 75% | 57% | 22% | ▲ |
| ✓ | Stable Living Situation | | 32 | 100% | 95% | 56% | 5% | |
| ✓ | Abstinence/Reduced Drug Use | | 19 | 59% | 55% | 27% | 4% | |
| 🔴 | Employed | | 15 | 47% | 50% | 25% | -3% | |
| 🔴 | Self Help | | 4 | 12% | 60% | 12% | -48% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 24 | 96% | 90% | 43% | 6% | |

## Service Engagement

| | Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | 2 or more Services within 30 days | | 6 | 75% | 75% | 66% | 0% | |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | 100% |
| Discharges | ▢ | ▢ | | 67% |
| Services | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

Legend:
▲ > 10% Over    ▼ < 10% Under

▮ Actual    | Goal    ✓ Goal Met    🔴 Below Goal

* State Avg based on Active Standard Outpatient Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**Addiction Recovery-Windham Area 545200**
United Services Inc.
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 37 | 36 | 3% | |
| Admits | 17 | 11 | 55% | ▲ |
| Discharges | 10 | 8 | 25% | ▲ |
| Service Hours | 107 | 91 | 17% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 100% | 89% |
| ✓ | Valid TEDS Data | 100% | 81% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 100% | 14% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid Axis I Diagnosis | 100% | 99% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 2 | 20% | 50% | 42% | -30% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Not Arrested | | 37 | 100% | 75% | 57% | 25% | ▲ |
| ✓ | Abstinence/Reduced Drug Use | | 27 | 73% | 55% | 27% | 18% | ▲ |
| ✓ | Stable Living Situation | | 37 | 100% | 95% | 56% | 5% | |
| 🔴 | Employed | | 18 | 49% | 50% | 25% | -1% | |
| 🔴 | Self Help | | 9 | 24% | 60% | 12% | -36% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 27 | 100% | 90% | 43% | 10% | |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | 2 or more Services within 30 days | | 16 | 94% | 75% | 66% | 19% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | 100% |
| Discharges | ▢ | ▢ | ▢ | 100% |
| Services | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

🟧 Actual    | Goal    ✓ Goal Met    🔴 Below Goal

* State Avg based on  Active Standard Outpatient Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**Adult OP Svs -Dayville MH**
United Services Inc.
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 948 | 973 | -3% | |
| Admits | 86 | 112 | -23% | ▼ |
| Discharges | 132 | 97 | 36% | ▲ |
| Service Hours | 1,881 | 2,258 | -17% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 98% | 90% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 99% | 52% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid Axis I Diagnosis | 100% | 98% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 29 | 22% | 50% | 42% | -28% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Employed | | 346 | 36% | 30% | 23% | 6% |
| ✓ | Social Support | | 626 | 66% | 60% | 57% | 6% |
| ✓ | Stable Living Situation | | 932 | 98% | 95% | 71% | 3% |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 786 | 96% | 90% | 74% | 6% |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| 🔴 | 2 or more Services within 30 days | | 60 | 70% | 75% | 79% | -5% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | 100% |
| Discharges | ▢ | ▢ | ▢ | 100% |
| Services | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

🟧 Actual    | Goal    ✓ Goal Met    🔴 Below Goal

* State Avg based on  Active Standard Outpatient Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**Adult Outpatient Svs - Windham Area**
United Services Inc.
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 723 | 782 | -8% | |
| Admits | 84 | 113 | -26% | ▼ |
| Discharges | 109 | 105 | 4% | |
| Service Hours | 1,710 | 1,963 | -13% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ | Valid NOMS Data | 99% | 90% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ | 6 Month Updates | 98% | 52% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ | Valid Axis I Diagnosis | 100% | 98% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 39 | 36% | 50% | 42% | -14% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Social Support | | 627 | 87% | 60% | 57% | 27% | ▲ |
| ✔ | Employed | | 265 | 37% | 30% | 23% | 7% | |
| ✔ | Stable Living Situation | | 711 | 98% | 95% | 71% | 3% | |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 604 | 98% | 90% | 74% | 8% |

## Service Engagement

| Outpatient | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| 🔴 | 2 or more Services within 30 days | | 61 | 73% | 75% | 79% | -2% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 100% |
| Discharges | | | | 100% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

Actual | Goal | ✔ Goal Met | 🔴 Below Goal

* State Avg based on  Active Standard Outpatient Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**BHH ADULT NAE**
United Services Inc.
Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 105 | 92 | 14% | ▲ |
| Admits | 11 | 14 | -21% | ▼ |
| Discharges | 7 | 5 | 40% | ▲ |
| Service Hours | 163 | 120 | 36% | ▲ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 99% | 90% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 96% | 52% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 98% | 98% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Treatment Completed Successfully | | 7 | 100% | 50% | 42% | 50% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Social Support | | 100 | 95% | 60% | 57% | 35% | ▲ |
| ✔ Stable Living Situation | | 104 | 99% | 95% | 71% | 4% | |
| ● Employed | | 14 | 13% | 30% | 23% | -17% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✔ | Clients Receiving Services | | 94 | 96% | 90% | 74% | 6% |

## Service Engagement

| Outpatient | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● 2 or more Services within 30 days | | 6 | 55% | 75% | 79% | -20% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | ▪ | ▪ | ▪ | 100% |
| Discharges | | ▪ | | 33% |
| Services | ▪ | ▪ | ▪ | 100% |

▪ 1 or more Records Submitted to DMHAS

▲ > 10% Over      ▼ < 10% Under

| ▪ Actual | | Goal | ✔ Goal Met | ● Below Goal |
|---|---|---|---|---|

* State Avg based on  Active Standard Outpatient Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**BHH CHILDREN Program**
United Services Inc.
Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 3 | 3 | 0% | |
| Admits | - | - | | |
| Discharges | - | - | | |
| Service Hours | 5 | 4 | 22% | ▲ |

## Service Engagement

| Homeless Outreach | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● at least 1 Service within 180 days | | 0 | 0% | 50% | 88% | -50% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| Discharges | | | | 0% |
| Services | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| ▢ Actual | │ Goal | ✓ Goal Met | ● Below Goal |
|---|---|---|---|

* State Avg based on  Active Outreach & Engagement Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**Brick Row 412-253**
United Services Inc.
Mental Health - Case Management - Supportive Housing – Development

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 20 | 22 | -9% | |
| Admits | 2 | 1 | 100% | ▲ |
| Discharges | 1 | - | | |
| Service Hours | 77 | 31 | 147% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Stable Living Situation | | 19 | 90% | 85% | 95% | 5% |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 18 | 90% | 90% | 89% | 0% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 97% | 99% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 95% | 84% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 33% |
| Discharges | | | | 33% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on  Active Supportive Housing – Development Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**Cedarwoods 424-260**
United Services Inc.
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)
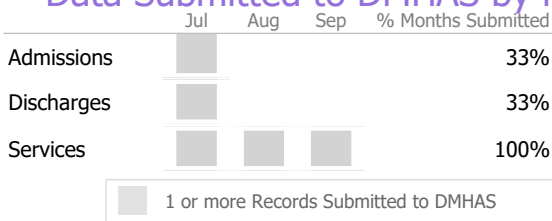
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 9 | 9 | 0% |
| Admits | 1 | - | |
| Discharges | - | - | |
| Service Hours | 20 | 42 | -52% ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Stable Living Situation | | 8 | 89% | 85% | 88% | 4% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 9 | 100% | 90% | 91% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 97% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 84% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 33% |
| Discharges | | | | 0% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

Actual | Goal     ✓ Goal Met     ● Below Goal

* State Avg based on Active Supportive Housing – Scattered Site Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**Clubhouse Apartments YAS**
United Services Inc.
Mental Health - Residential Services - Residential Support

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 0 | | |
| Admits | - | - | |
| Discharges | - | - | |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 77% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ● Employed | | N/A | N/A | 25% | 16% | -25% ▼ |
| ● Social Support | | N/A | N/A | 60% | 83% | -60% ▼ |
| ● Stable Living Situation | | N/A | N/A | 85% | 95% | -85% ▼ |

## Data Submission Quality
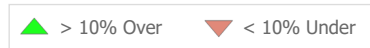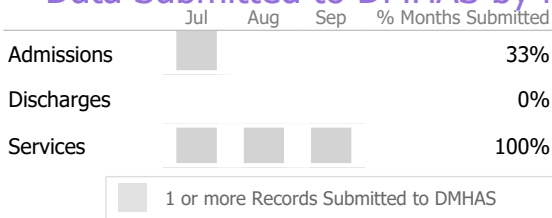
| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | N/A | 100% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| 6 Month Updates | | N/A | 92% |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|---|
| ● Avg Utilization Rate | | 3 | N/A | N/A | 0% | 90% | 74% | -90% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| Discharges | | | | 0% |

1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| ■ Actual | \| Goal | ✓ Goal Met | ● Below Goal |
|---|---|---|---|

\* State Avg based on  Active Residential Support Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**Coach 2.0 Homeless**
United Services Inc.
Addiction - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 70 | 14 | 400% | ▲ |
| Admits | 34 | 14 | 143% | ▲ |
| Discharges | 24 | 1 | 2300% | ▲ |
| Service Hours | 238 | 37 | | |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 95% | 95% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 83% | 42% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ● | Treatment Completed Successfully | | 10 | 42% | 50% | 73% | -8% |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Employed | | 18 | 25% | 20% | 23% | 5% | |
| ● | Stable Living Situation | | 43 | 61% | 80% | 72% | -19% | ▼ |
| ● | Self Help | | 10 | 14% | 60% | 45% | -46% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 43 | 91% | 90% | 67% | 1% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 100% |
| Discharges | | | | 100% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

Actual  | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on  Active Standard Case Management Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**Coach 2.0 Senior**
United Services Inc.
Addiction - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients ▲ | 17 | | |
| Admits | 3 | - | |
| Discharges | 11 | - | |
| Service Hours | 43 | - | |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 8 | 73% | 50% | 73% | 23% | ▲ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Employed | | 1 | 6% | 20% | 23% | -14% | ▼ |
| 🔴 | Stable Living Situation | | 10 | 59% | 80% | 72% | -21% | ▼ |
| 🔴 | Self Help | | 1 | 6% | 60% | 45% | -54% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| Valid NOMS Data | | 93% | 95% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 42% |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 6 | 100% | 90% | 67% | 10% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 100% |
| Discharges | | | | 100% |
| Services | | | | 100% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

☐ Actual    | Goal    ✓ Goal Met    🔴 Below Goal

* State Avg based on  Active Standard Case Management Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**Community Support Dayville -373Z**
United Services Inc.
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 79 | 145 | -46% | ▼ |
| Admits | 23 | 7 | 229% | ▲ |
| Discharges | 7 | 40 | -83% | ▼ |
| Service Hours | 572 | 771 | -26% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 98% | 87% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 100% | 83% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| | Valid Axis I Diagnosis | 95% | 98% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ● | Treatment Completed Successfully | | 1 | 14% | 65% | 57% | -51% | ▼ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Social Support | | 64 | 81% | 60% | 77% | 21% | ▲ |
| ✓ | Stable Living Situation | | 73 | 92% | 80% | 86% | 12% | ▲ |
| ● | Employed | | 14 | 18% | 20% | 14% | -2% | |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 71 | 99% | 90% | 94% | 9% | |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 100% |
| Discharges | | | | 100% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| ▮ Actual | ▎ Goal | ✓ Goal Met | ● Below Goal |
|---|---|---|---|

* State Avg based on  Active CSP Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**Community Support/RP Program 373X**
United Services Inc.
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 176 | 199 | -12% | ▼ |
| Admits | 29 | 22 | 32% | ▲ |
| Discharges | 24 | 27 | -11% | ▼ |
| Service Hours | 1,164 | 1,264 | -8% | |

## Data Submission Quality

| Data Entry | Actual % vs Goal | Actual | State Avg |
|---|---|---|---|
| ✔ Valid NOMS Data | | 99% | 87% |

| On-Time Periodic | Actual % vs Goal | Actual | State Avg |
|---|---|---|---|
| ✔ 6 Month Updates | | 99% | 83% |

| Diagnosis | Actual % vs Goal | Actual | State Avg |
|---|---|---|---|
| ✔ Valid Axis I Diagnosis | | 98% | 98% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 13 | 54% | 65% | 57% | -11% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✔ Social Support | | 158 | 90% | 60% | 77% | 30% | ▲ |
| ✔ Stable Living Situation | | 169 | 96% | 80% | 86% | 16% | ▲ |
| 🔴 Employed | | 20 | 11% | 20% | 14% | -9% | |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✔ Clients Receiving Services | | 142 | 93% | 90% | 94% | 3% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 100% |
| Discharges | | | | 100% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

Actual    | Goal    ✔ Goal Met    🔴 Below Goal

* State Avg based on  Active CSP Programs

Variances in data may be indicative of operational adjustments related to the pandemic.
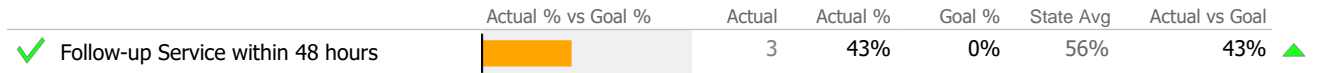
**Dayville Adult Crisis 201Y**
United Services Inc.
Mental Health - Crisis Services - Mobile Crisis Team

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 45 | 58 | -22% | ▼ |
| Admits | 28 | 47 | -40% | ▼ |
| Discharges | 34 | 38 | -11% | ▼ |

## Crisis

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✔ | Evaluation within 1.5 hours of Request | | 27 | 96% | 75% | 65% | 21% | ▲ |
| ✔ | Community Location Evaluation | | 26 | 93% | 80% | 73% | 13% | ▲ |
| 🔴 | Follow-up Service within 48 hours | | 7 | 88% | 90% | 64% | -2% | |
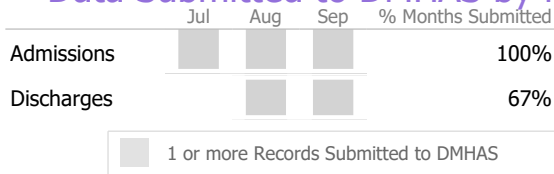
▲ > 10% Over    ▼ < 10% Under

🟧 Actual    | Goal    ✔ Goal Met    🔴 Below Goal

* State Avg based on  Active Mobile Crisis Team Programs

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | ▪ | ▪ | ▪ | 100% |
| Discharges | ▪ | ▪ | | 67% |

▪ 1 or more Records Submitted to DMHAS

Variances in data may be indicative of operational adjustments related to the pandemic.

**Employment Services - Windham Area**
United Services Inc.
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 34 | 28 | 21% | ▲ |
| Admits | 12 | 9 | 33% | ▲ |
| Discharges | 8 | 7 | 14% | ▲ |
| Service Hours | 109 | 234 | -53% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Employed | | 14 | 41% | 35% | 49% | 6% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 26 | 100% | 90% | 85% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 99% | 93% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 80% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 100% |
| Discharges | | | | 67% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on  Active Employment Services Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**Jail Diversion**
United Services Inc.
Forensic MH - Forensics Community-based - Court Liaison-Jail Diversion

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 64 | 50 | 28% | ▲ |
| Admits | 12 | 15 | -20% | ▼ |
| Discharges | 12 | 16 | -25% | ▼ |
| Service Hours | 19 | 70 | -72% | ▼ |

## Service Utilization
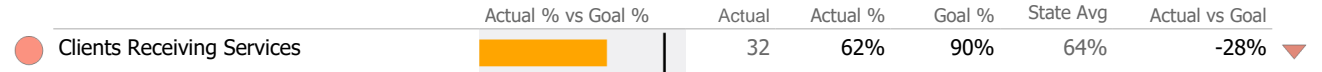
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Clients Receiving Services | | 32 | 62% | 90% | 64% | -28% | ▼ |

## Jail Diversion

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Follow-up Service within 48 hours | | 3 | 43% | 0% | 56% | 43% | ▲ |

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| ▮ Actual | ┃ Goal | ✓ Goal Met | ● Below Goal |
|---|---|---|---|

* State Avg based on  Active Court Liaison-Jail Diversion Programs

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | ▮ | ▮ | ▮ | 100% |
| Discharges | ▮ | ▮ | ▮ | 100% |
| Services | ▮ | ▮ | ▮ | 100% |

▮ 1 or more Records Submitted to DMHAS

Variances in data may be indicative of operational adjustments related to the pandemic.

**Mansfield MAT**
United Services Inc.
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 10 | 11 | -9% | |
| Admits | - | 1 | -100% | ▼ |
| Discharges | 1 | - | | |
| Service Hours | 43 | 96 | -56% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 100% | 94% |
| ✓ | Valid TEDS Data | 100% | 93% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 100% | 23% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid Axis I Diagnosis | 100% | 100% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 1 | 100% | 50% | 34% | 50% | ▲ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Abstinence/Reduced Drug Use | | 10 | 100% | 55% | 33% | 45% | ▲ |
| ✓ | Not Arrested | | 10 | 100% | 75% | 49% | 25% | ▲ |
| 🔴 | Stable Living Situation | | 9 | 90% | 95% | 46% | -5% | |
| 🔴 | Employed | | 4 | 40% | 50% | 19% | -10% | |
| 🔴 | Self Help | | 0 | 0% | 60% | 10% | -60% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 9 | 100% | 90% | 34% | 10% | |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| Discharges | ▢ | | | 33% |
| Services | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

▢ Actual    | Goal    ✓ Goal Met    🔴 Below Goal

\* State Avg based on  Active Buprenorphine Maintenance Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**Mill on Killingly**
United Services Inc.
Mental Health - Case Management - Supportive Housing – Development

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 22 | 26 | -15% | ▼ |
| Admits | - | 1 | -100% | ▼ |
| Discharges | 1 | 1 | 0% | |
| Bed Days | 2,009 | 2,317 | -13% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Stable Living Situation | | 22 | 100% | 85% | 95% | 15% | ▲ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|
| ✓ Avg Utilization Rate | | 16 | 1,148 days | 0.7 | 136% | 90% | 136% | 46% | ▲ |

| | < 90% | | 90-110% | | >110% |
|---|---|---|---|---|---|
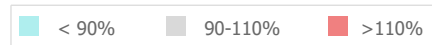
## Data Submission Quality

| Data Entry | Actual | State Avg |
|---|---|---|
| ✓ Valid NOMS Data | 100% | 99% |

| On-Time Periodic | Actual | State Avg |
|---|---|---|
| ✓ 6 Month Updates | 100% | 84% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| Discharges | | | | 33% |

1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| Actual | Goal | ✓ Goal Met | ● Below Goal |
|---|---|---|---|

* State Avg based on  Active Supportive Housing – Development Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**Milner House 412-240**
United Services Inc.
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)
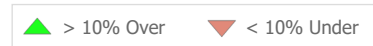
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 14 | 14 | 0% | |
| Admits | 7 | 1 | 600% | ▲ |
| Discharges | 4 | 3 | 33% | ▲ |
| Bed Days | 643 | 1,168 | -45% | ▼ |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 3 | 75% | 80% | 64% | -5% | |
| ✅ | No Re-admit within 30 Days of Discharge | | 4 | 100% | 85% | 93% | 15% | ▲ |
| 🔴 | Follow-up within 30 Days of Discharge | | 2 | 67% | 90% | 67% | -23% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✅ | Valid NOMS Data | 98% | 97% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✅ | 6 Month Updates | 100% | 89% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✅ | Valid Axis I Diagnosis | 100% | 100% |

## Recovery

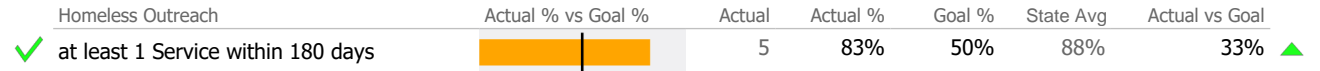| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✅ Social Support | | 10 | 71% | 60% | 84% | 11% | ▲ |
| ✅ Stable Living Situation | | 13 | 93% | 90% | 98% | 3% | |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|
| 🔴 Avg Utilization Rate | | 14 | 191 days | 1.0 | 50% | 90% | 88% | -40% | ▼ |

☐ < 90%   ☐ 90-110%   ☐ >110%

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 100% |
| Discharges | | | | 100% |

☐ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

☐ Actual   | Goal   ✅ Goal Met   🔴 Below Goal

* State Avg based on  Active Group Home Programs
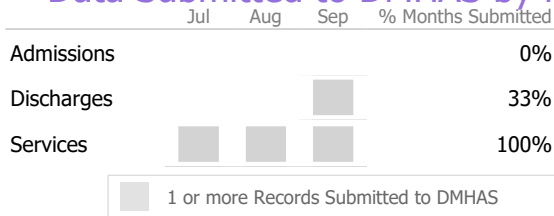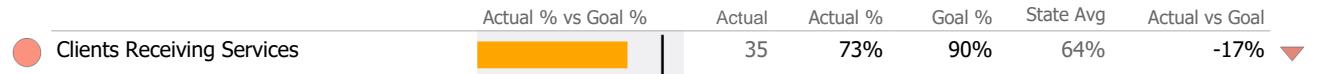
Variances in data may be indicative of operational adjustments related to the pandemic.

**Next Step Supportive Hsg412551**
United Services Inc.
Mental Health - Case Management - Supportive Housing – Scattered Site

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 8 | 8 | 0% | |
| Admits | 1 | - | | |
| Discharges | - | - | | |
| Service Hours | 67 | 50 | 34% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Stable Living Situation | | 6 | 75% | 85% | 88% | -10% |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| 🔴 Clients Receiving Services | | 7 | 88% | 90% | 91% | -2% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✅ Valid NOMS Data | | 100% | 97% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✅ 6 Month Updates | | 100% | 84% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 33% |
| Discharges | | | | 0% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over        ▼ < 10% Under

| | Actual | | Goal | ✅ Goal Met | 🔴 Below Goal |

* State Avg based on  Active Supportive Housing – Scattered Site Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**Senior Outreach**
United Services Inc.
Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)
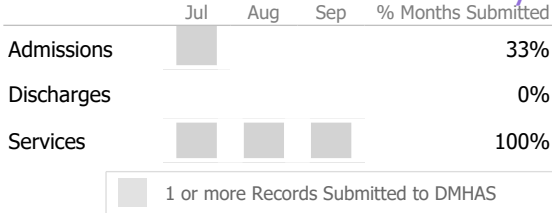
## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 27 | 13 | 108% | ▲ |
| Admits | 6 | - | | |
| Discharges | 5 | 6 | -17% | ▼ |
| Service Hours | 199 | 2 | | |

## Service Engagement

| Homeless Outreach | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | at least 1 Service within 180 days | | 5 | 83% | 50% | 88% | 33% | ▲ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 100% |
| Discharges | | | | 100% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over        ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on  Active Outreach & Engagement Programs

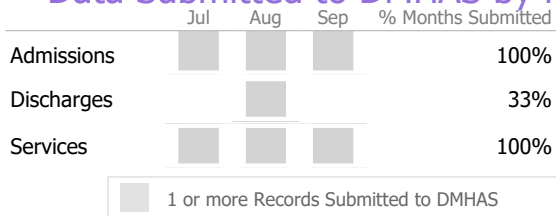Variances in data may be indicative of operational adjustments related to the pandemic.

**Shelter Outreach CM 412-220**
United Services Inc.
Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 6 | 8 | -25% | ▼ |
| Admits | - | - | | |
| Discharges | 1 | 5 | -80% | ▼ |
| Service Hours | 7 | 11 | -35% | ▼ |

## Service Engagement

| Homeless Outreach | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● at least 1 Service within 180 days | | 0 | 0% | 50% | 88% | -50% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| Discharges | | | ▢ | 33% |
| Services | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

▢ Actual   | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on  Active Outreach & Engagement Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**Social Club - Windham Area**
United Services Inc.
Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 51 | 55 | -7% | |
| Admits | 6 | 7 | -14% | ▼ |
| Discharges | 3 | 1 | 200% | ▲ |
| Service Hours | 2 | | | |
| Social Rehab/PHP/IOP Days | 574 | 427 | 34% | ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Clients Receiving Services | ▬▬▬▬ | 35 | 73% | 90% | 64% | -17% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | ▪ | ▪ | ▪ | 100% |
| Discharges | | ▪ | | 33% |
| Services | ▪ | ▪ | ▪ | 100% |

▪ 1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

■ Actual  | Goal  ✓ Goal Met  ● Below Goal

* State Avg based on  Active Social Rehabilitation Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**Social Rehab 412-280**
United Services Inc.
Mental Health - Social Rehabilitation - Social Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 65 | 61 | 7% | |
| Admits | 10 | 6 | 67% | ▲ |
| Discharges | 3 | 6 | -50% | ▼ |
| Service Hours | 221 | 14 | | |
| Social Rehab/PHP/IOP Days | 263 | 331 | -21% | ▼ |

## Service Utilization
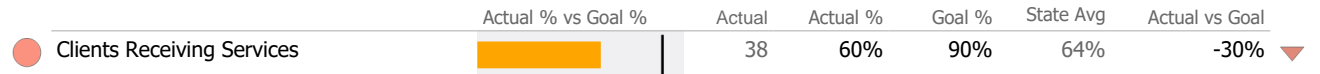
| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ● Clients Receiving Services | | 38 | 60% | 90% | 64% | -30% | ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 100% |
| Discharges | | | | 100% |
| Services | | | | 100% |

☐ 1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

■ Actual   | Goal   ✓ Goal Met   ● Below Goal

* State Avg based on  Active Social Rehabilitation Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**SOR - Employment**
United Services Inc.
Addiction - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 14 | 31 | -55% | ▼ |
| Admits | 6 | 9 | -33% | ▼ |
| Discharges | 10 | 13 | -23% | ▼ |
| Service Hours | 18 | 164 | -89% | ▼ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Employed | | 8 | 57% | 35% | 31% | 22% | ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 4 | 100% | 90% | 74% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 96% | 91% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 63% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | ▪ | ▪ | | 67% |
| Discharges | ▪ | ▪ | ▪ | 100% |
| Services | ▪ | ▪ | ▪ | 100% |

▫ 1 or more Records Submitted to DMHAS

▲ > 10% Over        ▼ < 10% Under

▪ Actual    | Goal    ✓ Goal Met    ● Below Goal

\* State Avg based on  Active Employment Services Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**SOR E-MAT**
United Services Inc.
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 22 | 22 | 0% | |
| Admits | 2 | 3 | -33% | ▼ |
| Discharges | 2 | 4 | -50% | ▼ |
| Service Hours | 118 | 155 | -24% | ▼ |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid NOMS Data | 98% | 94% |
| ✓ | Valid TEDS Data | 97% | 93% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ | 6 Month Updates | 100% | 23% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| ✓ | Valid Axis I Diagnosis | 100% | 100% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| 🔴 | Treatment Completed Successfully | | 0 | 0% | 50% | 34% | -50% | ▼ |

## Recovery

| | National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Abstinence/Reduced Drug Use | | 18 | 82% | 55% | 33% | 27% | ▲ |
| ✓ | Not Arrested | | 22 | 100% | 75% | 49% | 25% | ▲ |
| ✓ | Employed | | 13 | 59% | 50% | 19% | 9% | |
| ✓ | Stable Living Situation | | 22 | 100% | 95% | 46% | 5% | |
| 🔴 | Self Help | | 1 | 5% | 60% | 10% | -55% | ▼ |

## Service Utilization

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Clients Receiving Services | | 20 | 100% | 90% | 34% | 10% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | ▢ | ▢ | 67% |
| Discharges | | ▢ | | 33% |
| Services | ▢ | ▢ | ▢ | 100% |

▢ 1 or more Records Submitted to DMHAS

▲ > 10% Over     ▼ < 10% Under

Actual | Goal  ✓ Goal Met  🔴 Below Goal

* State Avg based on  Active Buprenorphine Maintenance Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**SOR-MAT-Naltrexone**
United Services Inc.
Addiction - Medication Assisted Treatment - Naltrexone

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % |
|---|---|---|---|
| Unique Clients | 0 | | |
| Admits | - | - | |
| Discharges | - | - | |
| Service Hours | - | - | |
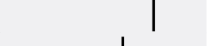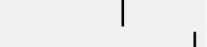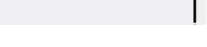
## Data Submission Quality

| Data Entry | Actual | State Avg |
|---|---|---|
| Valid NOMS Data | N/A | 95% |
| Valid TEDS Data | N/A | 89% |

| On-Time Periodic | Actual | State Avg |
|---|---|---|
| 6 Month Updates | N/A | 18% |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 50% | 20% | N/A |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Abstinence/Reduced Drug Use | | N/A | N/A | 55% | 40% | -55% ▼ |
| Employed | | N/A | N/A | 50% | 23% | -50% ▼ |
| Not Arrested | | N/A | N/A | 75% | 75% | -75% ▼ |
| Self Help | | N/A | N/A | 60% | 23% | -60% ▼ |
| Stable Living Situation | | N/A | N/A | 95% | 65% | -95% ▼ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Clients Receiving Services | | N/A | N/A | 90% | 35% | N/A ▼ |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| Discharges | | | | 0% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

◼ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on  Active Naltrexone Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**Transitional Living Housing (TLH) YAS**
United Services Inc.
Mental Health - Residential Services - Supervised Apartments

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 4 | 9 | -56% | ▼ |
| Admits | - | 2 | -100% | ▼ |
| Discharges | 3 | 5 | -40% | ▼ |
| Bed Days | 1,432 | 2,448 | -42% | ▼ |

## Data Submission Quality

| Data Entry | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 84% |

| On-Time Periodic | Actual % vs Goal % | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 90% |

## Discharge Outcomes

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|---|
| ✓ | Treatment Completed Successfully | | 2 | 67% | 60% | 72% | 7% |
| ✓ | Follow-up within 30 Days of Discharge | | 2 | 100% | 90% | 74% | 10% |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 4 | 100% | 60% | 85% | 40% | ▲ |
| ✓ Employed | | 2 | 50% | 25% | 11% | 25% | ▲ |
| ● Stable Living Situation | | 3 | 75% | 95% | 93% | -20% | ▼ |

## Bed Utilization

| | 12 Months Trend | Beds | Avg LOS | Turnover | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|---|
| ✓ Avg Utilization Rate | | 15 | 685 days | 3.8 | 104% | 90% | 95% | 14% | ▲ |

| < 90% | 90-110% | >110% |
|---|---|---|

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 0% |
| Discharges | | | | 33% |

1 or more Records Submitted to DMHAS

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| Actual | Goal | ✓ Goal Met | ● Below Goal |
|---|---|---|---|

\* State Avg based on  Active Supervised Apartments Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**Windham Area Adult Crisis 412-200**
United Services Inc.
Mental Health - Crisis Services - Mobile Crisis Team

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 30 | 35 | -14% | ▼ |
| Admits | 23 | 34 | -32% | ▼ |
| Discharges | 24 | 15 | 60% | ▲ |

## Crisis

| | | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|---|
| ✓ | Evaluation within 1.5 hours of Request | | 24 | 100% | 75% | 65% | 25% | ▲ |
| ✓ | Community Location Evaluation | | 23 | 96% | 80% | 73% | 16% | ▲ |
| 🔴 | Follow-up Service within 48 hours | | 9 | 82% | 90% | 64% | -8% | |

| ▲ > 10% Over | ▼ < 10% Under |
|---|---|

| 🟧 Actual | ❘ Goal | ✓ Goal Met | 🔴 Below Goal |
|---|---|---|---|
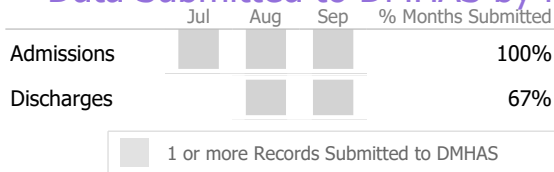
* State Avg based on Active Mobile Crisis Team Programs

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | ▢ | ▢ | ▢ | 100% |
| Discharges | ▢ | ▢ | | 67% |

▢ 1 or more Records Submitted to DMHAS

Variances in data may be indicative of operational adjustments related to the pandemic.

**Work Services**
United Services Inc.
Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 44 | 27 | 63% | ▲ |
| Admits | 13 | 5 | 160% | ▲ |
| Discharges | 9 | 10 | -10% | |
| Service Hours | 259 | 186 | 40% | ▲ |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Employed | | 25 | 57% | 35% | 49% | 22% | ▲ |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 35 | 100% | 90% | 85% | 10% |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 93% | 93% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 80% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | | | 100% |
| Discharges | | | | 100% |
| Services | | | | 100% |

1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

* State Avg based on  Active Employment Services Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

**YAS ACT 412382**
United Services Inc.
Mental Health - ACT - Assertive Community Treatment

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2022 - September 2022  (Data as of Dec 16, 2022)

## Program Activity

| Measure | Actual | 1 Yr Ago | Variance % | |
|---|---|---|---|---|
| Unique Clients | 12 | 23 | -48% | ▼ |
| Admits | 1 | 1 | 0% | |
| Discharges | - | 6 | -100% | ▼ |
| Service Hours | 771 | 1,157 | -33% | ▼ |

## Discharge Outcomes

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| Treatment Completed Successfully | | N/A | N/A | 65% | 72% | N/A |
| No Re-admit within 30 Days of Discharge | | N/A | N/A | 85% | 92% | N/A |
| Follow-up within 30 Days of Discharge | | N/A | N/A | 90% | 38% | N/A |

## Data Submission Quality

| Data Entry | | Actual | State Avg |
|---|---|---|---|
| ✓ Valid NOMS Data | | 100% | 89% |

| On-Time Periodic | | Actual | State Avg |
|---|---|---|---|
| ✓ 6 Month Updates | | 100% | 87% |

| Diagnosis | | Actual | State Avg |
|---|---|---|---|
| Valid Axis I Diagnosis | | 92% | 97% |

## Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal | |
|---|---|---|---|---|---|---|---|
| ✓ Social Support | | 12 | 100% | 60% | 78% | 40% | ▲ |
| ✓ Stable Living Situation | | 11 | 92% | 60% | 90% | 32% | ▲ |
| ✓ Employed | | 2 | 17% | 15% | 17% | 2% | |

## Service Utilization

| | Actual % vs Goal % | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|---|---|---|---|---|---|---|
| ✓ Clients Receiving Services | | 12 | 100% | 90% | 97% | 10% |

## Data Submitted to DMHAS by Month

| | Jul | Aug | Sep | % Months Submitted |
|---|---|---|---|---|
| Admissions | | ▣ | | 33% |
| Discharges | | | | 0% |
| Services | ▣ | ▣ | ▣ | 100% |

▣ 1 or more Records Submitted to DMHAS

▲ > 10% Over   ▼ < 10% Under

| | | |
|---|---|---|
| ▣ Actual | ❘ Goal | ✓ Goal Met | ● Below Goal |

* State Avg based on  Active Assertive Community Treatment Programs

Variances in data may be indicative of operational adjustments related to the pandemic.